

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	g.h.		12/1/99
O.I.P.E. CLASSIFIER		43	12/1/99
FORMALITY REVIEW	g.h.	64930	12-22

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓		12/1/99
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Claim	Final	Original	Date
51	✓		12/1/99
52	✓		
53	✓		
54	✓		
55	✓		
56	✓		
57	✓		
58	✓		
59	✓		
60	✓		
61	✓		
62	N		
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70	N		
71	✓		
72	✓		
73	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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